



# Iowa Department of Human Services

Terry E. Branstad  
Governor

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Director

## INFORMATIONAL LETTER NO.1670

**DATE:** May 20, 2016

**TO:** Iowa Medicaid Physicians, Hospitals, Advanced Registered Nurse Practitioners (ARNPs), Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs), Podiatrists, Clinics, Family Planning Clinics, Ambulatory Surgical Centers, Certified Nurse Midwives (CNMs), Physician Assistants (PAs), and Managed Care Organizations (MCOs)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Radiology Prior Authorization (PA) Submission Process Changes

**EFFECTIVE:** July 1, 2016

McKesson Clear Coverage (MCC) is the High Tech Radiology PA submission/approval system currently used by all Medicaid providers performing High Tech Radiology services, under Fee-for-Service (FFS) Medicaid and consistent with 441 Iowa Administrative Code 78.28(11).

Effective July 1, 2016, MCC will no longer be used by the IME. This change is driven by the IA Health Link managed care program which went live on April 1, 2016, and the recognition that the MCOs are able to utilize their own High Tech Radiology approval processes, pursuant to the above-cited rule.

The process for submitting PAs for High Tech Radiology requests effective July 1, 2016, is as follows:

Providers will need to contact the Eligibility Verification System (ELVS) line at 1-800-338-7752 or locally at 515-323-9639 for the member's eligibility status. If a member is enrolled with one of the MCOs, the member's MCO should be contacted for their individual High Tech Radiology PA process, prior to performing the requested High Tech Radiology procedure.

If the member is not enrolled with an MCO, but is enrolled under Medicaid FFS, a copy of the [Request for Prior Authorization](#)<sup>1</sup> form should be completed by the provider and submitted via fax at 1-515-725-1356 or via secure email at [paservices@dhs.state.ia.us](mailto:paservices@dhs.state.ia.us) prior to performing the requested High Tech Radiology procedure. Supportive clinic documentation should accompany the PA form.

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or by email at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).

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<sup>1</sup> [https://dhs.iowa.gov/sites/default/files/470-0829\\_RequestPriorAuthorization\\_0.pdf](https://dhs.iowa.gov/sites/default/files/470-0829_RequestPriorAuthorization_0.pdf)